| Case 16-07160 Doc 1 Fill in this information to identify your case: | Filed 03/01/16 | Entered 03/01/16 17:38:44 age 1 of 70 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Denise | |
| NAZSIA di anno andro de secono | First name | First name |
| Write the name that is on your government-issued | Middle name | Middle name |
| picture identification (for example, your driver's | Gordon | Middle Hame |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | Middle name | Middle name |
| Include your married or | Middle Hame | wildlie Hairie |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 6377 | xxx - xx |
| Security number or | OR | OR |
| federal Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Denise Case 16-07160 MDoc 1 Filed 03:04:16 Entered 03/01/16 /147:38:44 Desc Main Debtor 1 Page 2 of 70 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 6045 W Grand Ave., Apt 516 Number Street Number Street Illinois 60639 Chicago Zip Code City State City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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| Denise Case 16-07160 MDoc 1 Filed 03/01/16 Entered 03/01/16 / Ario 38:44 Desc Main
| Denise Case 16-07160 MDoc 1 Filed 03/01/16 Page 3 of 70

Page 3 of 70 Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Denise Case 16-07160 MDoc 1 Filed 03:04:16 Entered 03/01/16 /147:38:44 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent

repairs?

State

City

Zip Code

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Name Middle Name Docume

You must check one:

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credi |
|---|
| counseling because of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of

completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Denise Case 16-07160 MDoc 1 Filed 03/01/16 Entered 03/01/16 (147:38:44 Desc Main Page 6 of 70 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Denise Gordon Signature of Debtor 2 Signature of Debtor 1 Executed on 3/1/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Denise Case 16-07160 MDoc 1 Filed 0340416 Entered 03401416 (1476)38:44 Desc Main

First Name Document Page 7 of 70

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Mary Walters 6315822 | | | Date | 3/1/2016 | |
|---------------------------------|------------|-------------|------|----------------|--|
| Signature of Attorney for Debto | r | | | MM / DD / YYYY | |
| Mary Walters 6315822 | | | | | |
| Printed name | | | | | |
| Semrad Law Firm | | | | | |
| Firm name | | | | | |
| | 20 S Clark | St Ste 2800 | | | |
| Number | Street | | | | |
| Chicago | | Illinois | | 60603 | |
| City | | State | | Zip Code | |
| Contact phone3129 | 130625 | | E | Email address | |
| 6315822 | | | II | llinois | |
| Bar number | | | | State | |

<u> Case 16-07160 Doc 1 Filed 03/01/16 Fntered 03/0</u>1/16 17:38:44 Desc Main Fill in this information to identify your case: Debtor 1 Denise Gordon First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$23,701.00 1b. Copy line 62, Total personal property, from Schedule A/B \$23,701.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities

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Debtor 1 Denise Case 16-07160 MDoc 1 Filed 03601616 Entered 03601616 Avaisa8:44 Desc Main

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| Pa | tt 4: Answer These Questions for Administrative and Statistical Records | | | | | | | | | |
|------|--|--------------------------|--|--|--|--|--|--|--|--|
| 6. 4 | Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | |
| | ✓ Yes. | | | | | | | | | |
| 7. \ | What kind of debt do you have? | | | | | | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual prim family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. | | | | | | | | | |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules. | heck this box and submit | | | | | | | | |
| 8. | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | | | | | |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | | |
| | From Part 4 on Schedule E/F, copy the following: | Total claim | | | | | | | | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | | | | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$3,500.00 | | | | | | | | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | | | | |
| | 9d. Student loans. (Copy line 6f.) | \$0.00 | | | | | | | | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as | \$0.00 | | | | | | | | |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$0.00 | | | | | | | | |
| | 9g. Total. Add lines 9a through 9f | \$3,500,00 | | | | | | | | |

| | | Case 16-07160 | | Filed 03/01/16 | Entered 03/01/10 | 6 17:38:44 | Desc | c Main |
|--|--------------------------|--|---|--|---|--|---------------------------------|---|
| Fill in this | informa | ation to identify your case: | | | J | | | |
| Debtor 1 | | Denise First Name | M Middle I | Gordon Name Last N | | | | |
| Debtor 2 (Spouse, i | if filing) | First Name | Middle I | Name Last N | lame | | | |
| United Sta | ates Ba | nkruptcy Court for the: | Northern | District of III | | | | |
| Case num | nber | | | (8 | State) | | | |
| Officia | al Fo | orm 106A/B | | | | | | Check if this is an amended filing |
| | | A/B: Propei | rtv | | | | | 12/1 |
| category v responsib write your Part 1: | where yole for some name | ou think it fits best. Be supplying correct inforn and case number (if kno ribe Each Residenc | as complete and nation. If more s wn). Answer eve e, Building, L | l accurate as possible. It pace is needed, attach a ery question. _and, or Other Real | n asset fits in more than on f two married people are fi a separate sheet to this for I Estate You Own or I I, land, or similar property? | ling together, both m. On the top of a lave an Interes | n are equ any addi | ıally |
| V | | o to Part 2 | | , , | | | | |
| | Yes. V | Where is the property? | | | | | | |
| 1.1 | Street | address, if available, or o | ther description | What is the property? Single-family home | • | the amount of ar | ny secure | aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| | | | | Duplex or multi-unit Condominium or co Manufactured or mo | operative | Current value entire property | | Current value of the portion you own? |
| | Numb | er Street State | Zip Code | Land Investment property Timeshare Other | | interest (such a | as fee sii | your ownership mple, tenancy by estate), if known. |
| | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the d Other information you | lebtors and another u wish to add about this ite | (see instru | ictions) | mmunity property |
| If you | own or | have more than one, list he | ere. | property identification | n number: | | | |
| 1.2 | Street | address, if available, or o | ther description | What is the property? Single-family home Duplex or multi-unit Condominium or co | t building | the amount of ar | ny secure Have Cla of the | aims or exemptions. Put d claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| | Numb | er Street State | Zip Code | Manufactured or mo Land Investment property Timeshare Other | | Describe the n | — ature of as fee si | your ownership mple, tenancy by estate), if known. |
| | • | | | Debtor 1 only Debtor 2 only Debtor 1 and Debto At least one of the d | lebtors and another u wish to add about this ite | see instru | ictions) | mmunity property |

| Debtor 1 | Denise Case 16-07160 MDoc 1 First Name Middle Name | Filed 03/01/16 Entered 03/01/160 Document Page 11 of 70 | 6(14kn7ki38:44 Desc | : Main |
|-------------------------|---|--|---|-------------------------|
| 1.3 Stre | et address, if available, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | I claims on Schedule D: |
| Nun City | | Land Investment property Timeshare Other | Describe the nature of y interest (such as fee sim the entireties, or a life ex | ple, tenancy by |
| | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is com (see instructions) | munity property |
| | | Other information you wish to add about this item, s property identification number: all of your entries from Part 1, including any entries fore | or pages | |
| Do you ov you own th | at someone else drives. If you lease a vehicle, als ns, trucks, tractors, sport utility vehicles, motorc | in any vehicles, whether they are registered or not? In so report it on Schedule G: Executory Contracts and Unexp ycles | | |
| 3.1 | Make Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | | d claims on Schedule D: |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | d claims on Schedule D: |
| | | Check if this is community property (see | | |

| Debtor 1 | Denise Case 16-07160 MDoc 1 | Filed 03:401:/16 Entered 03:/01:/16 | ്ഷിറും38:44 Desc Main |
|----------|---|--|---|
| | First Name Middle Name | Document Page 12 of 70 | |
| 3.3 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put |
| | Model: | one. | the amount of any secured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of the Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? |
| | | At least one of the debtors and another | |
| | | Check if this is community property (see | |
| | | instructions) | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put |
| | Model: | one. | the amount of any secured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of the Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? |
| | | At least one of the debtors and another | |
| | | Check if this is community property (see instructions) | |
| 4.1 | Make | Who has an interest in the property? Check one. | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: | | Creditors Who thave dialing decared by I reperty. |
| | | Debtor 2 only | Current value of the Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? |
| | | At least one of the debtors and another | |
| | | Check if this is community property (see instructions) | |
| 4.2 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put |
| | Model: | one. | the amount of any secured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of the Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? |
| | | At least one of the debtors and another | |
| | | Check if this is community property (see instructions) | |
| 5. Add | the dollar value of the portion you own for a | III of your entries from Part 2, including any entries | for pages |
| | | e | |

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Part 3: Describe Your Personal and Household Items

| Do you own or | nave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|--|--|
| 6. Household good | ds and furnishings | |
| Examples: Major ap | opliances, furniture, linens, china, kitchenware | |
| ☐ No | | _ |
| Yes. Describe | Used Furniture | \$600.00 |
| | ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games | |
| ☐ No | | |
| Yes. Describe | Used Electronics | \$400.00 |
| stamp, | alue s and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; coin, or baseball card collections; other collections, memorabilia, collectibles | |
| ✓ No | | |
| Yes. Describe | | |
| | ports and hobbies ohotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes aks; carpentry tools; musical instruments | |
| ✓ No | | |
| Yes. Describe | | |
| 10. Firearms Examples: Pistols, ✓ No ✓ Yes. Describe | rifles, shotguns, ammunition, and related equipment | |
| 11. Clothes Examples: Everyda | y clothes, furs, leather coats, designer wear, shoes, accessories | |
| ✓ Yes. Describe | Used Clothing | \$400.00 |
| 12. Jewelry Examples: Everyday gold, sil | y jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, wer | |
| ✓ No | | |
| Yes. Describe | | |
| 13. Non-farm anim Examples: Dogs, c | | |
| Yes. Describe | |] <u></u> |
| 14. Any other person | onal and household items you did not already list, including any health aids you did not list | |
| ✓ No | | |
| Yes. Describe | | T ——— |
| 15. Add the dollar | value of all of your entries from Part 3, including any entries for pages you have attached | \$1400.00 |
| for Part 3. Write tha | at number here | Ψ1100.00 |

Debtor 1 Denise Case 16-07160 MDoc 1 Filed 03401416 Entered 03401416 (1476:38:44 Desc Main First Name Document Page 14 of 70

Part 4: Describe Your Financial Assets

Current value of the portion you own?

Do you own or have any legal or equitable interest in any of the following?

| Do | you own or have ar | ny legal or equitable inter | rest in any of the following | ງ ? | portion you own? Do not deduct secured claims or exemptions. |
|-----|---|--|--|------------------------------|--|
| | ✓ No | | fe deposit box, and on hand when yo | ou file your petition | |
| 17. | Deposits of money Examples: Checking, sav and other similar insti | | ertificates of deposit; shares in cred | | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | PNC | | \$1600.00 |
| | | 17.2. Checking account:17.3. Savings account: | PNC Bank | | \$701.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | Bonds, mutual funds, of Examples: Bond funds, inv | or publicly traded stocks vestment accounts with brokerage fi | irms, money market accounts | | |
| | ✓ No ☐ Yes | Institution or issuer name: | | | |
| | | | | | |
| 19. | Non-publicly traded sto an LLC, partnership, an | | d and unincorporated business | es, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | |

Denise Case 16-07160 MDoc 1 Filed 03/01/16 Entered 03/01/166 (147):38:44 Desc Main Document Page 15 of 70 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Type of account: Institution name: Yes. List each \$20000.00 Pension with CPS account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

| Debt | or 1 | Denise Cas First Name | se 10 | 6-07160 | MDoc 1 Middle Name | | 03¢04/16 cumethtme | | | 6@1476i38: <u>44</u> | Desc Main |
|------|----------|----------------------------|----------|----------------------------------|------------------------------------|--------------|--|----------------|--------------------|----------------------|---|
| 24. | | | | tion IRA, in a , 529A(b), and | | a qualified | d ABLE progra | m, or unde | a qualified sta | te tuition program. | |
| | ✓ | No In Yes | stitutio | on name and c | lescription. Sep | arately file | the records of a | ny interests. | 11 U.S.C. § 521(| c): | |
| | | _ | | | | | | | | | |
| 25. | | sts, equitablercisable for | | | ts in property | (other tha | an anything lis | ted in line 1 |), and rights or | powers | |
| | ✓ | No | | | | | | | | | |
| | | Yes. Describ | e | | | | | | | | |
| 26. | | | | | | | intellectual pro yalties and licens | | ents | | |
| | | No Yes. Describ | e | | | | | | | | |
| 27. | | | | | eneral intangil e licenses, coo | | ssociation holdir | gs, liquor lic | enses, professio | nal licenses | |
| | ✓ | No | | | | | | | | | |
| | | Yes. Describ | е | | | | | | | | |
| Mor | ney (| or propert | y ow | ed to you | ? | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax | refunds owe | d to y | ou | | | | | | | |
| | | No | | | | | | | | Endorol: | |
| | Ш | Yes. Give spe about th | | nformation cluding wheth | er | | | | | Federal: | |
| | | | • | ed the returns ars | | | | | | State: | |
| 29 | Fam | nily support | | G. G | | | | | | Local: | |
| 20. | Exar | | ie or lu | ımp sum alimo | ny, spousal sup | pport, child | support, mainte | nance, divor | ce settlement, pro | operty settlement | |
| | Ħ | | cific in | formation | | | | | | Alimony: | |
| | | Too. Give ope | , o o | | | | | | | Maintenance: | |
| | | | | | | | | | | Support: | |
| | | | | | | | | | | Divorce settlement | : |
| | | | | | | | | | | Property settlemen | t: |
| 30. | | <i>nples:</i> Unpaid | wage | - | | | • | pay, vacatior | ı pay, workers' co | mpensation, | |
| | ✓ | No | | | | | | | | | |
| | | Yes. Describe | e | | | | | | | | |

| Debt | or 1 | Denise Case 16 First Name | 6-07160 | MDOC 1 Middle Name | | 03¢01/16 umætnt | Entered Page 17 (| | .6 (14.7√38: <u>44</u> | Des | c Main |
|------|----------|---|------------------|-----------------------|---------------|---------------------------------------|----------------------|-----------------|-------------------------------|------------------|--|
| 31. | | rests in insurance mples: Health, disabi | | rance; health | | | J | | 's insurance | | |
| | | No Yes. Name the insur of each policy and lis | | , | Company na | me: | | | Beneficiary: | | Surrender or refund value: |
| 32. | If you | interest in propert u are the beneficiary erty because someo No Yes. Describe | of a living trus | | | | policy, or are curr | rently entitled | d to receive | | |
| 33. | Exar | ms against third pa mples: Accidents, em No | | | | | ade a demand f | for paymen | nt | | |
| 0.4 | _ | Yes. Describe | | -1-1 | | · · · · · · · · · · · · · · · · · · · | | 41-1-1-1-1 | | _ | |
| 34. | to so | er contingent and et off claims No Yes. Describe | unliquidated | claims of ev | ery nature, | including co | unterclaims of | the debtor | and rights | 7 - | |
| 35. | ✓ | financial assets you No Yes. Describe | u did not alre | ady list | | | | | | | |
| 36. | | the dollar value of Part 4. Write that nu | - | | | | | | | | \$22301.00 |
| Part | 5: | Describe Any E | susiness-R | elated Pro | perty You | ı Own or Ha | ave an Intere | est In. Lis | st any real estate | in P | art 1. |
| 37. | Do y | ou own or have ar | y legal or equ | uitable inter | est in any bu | usiness-relate | d property? | | | | |
| | | No. Go to Part 6. Yes. Go to line 38. | | | | | | | | por Do | rrent value of the tion you own? not deduct secured claims exemptions |
| 38. | ✓ | ounts receivable or No Yes. Describe | commission | s you alread | y earned | | | | | _ | |
| 39. | Exar | ce equipment, furn mples: Business-rela No Yes. Describe | | | odems, print | ers, copiers, fa | x machines, rugs | s, telephone | s, desks, chairs, electr | onic de | evices |
| | | | | | | | | | | | |

| Deb | tor 1 Denise Case 10 | | esc Main |
|-------|---|---|---|
| 40. | First Name Machinery, fixtures, equ | Middle Name Docume name Page 18 of 70 uipment, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| 42. | Interests in partnershi | ps or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific information about them | Name of entity: % of ownership: | |
| 43. (| Customer lists, mailing | lists, or other compilations | |
| | ✓ No | | |
| | | clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | — ∏ No | | |
| | Yes. Descri | be | |
| | _ | | |
| 44. | Any business-related p | roperty you did not already list | |
| | ✓ No | | |
| | Yes. Give specific information | | |
| | iriioimation | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | l of your entries from Part 5, including any entries for pages you have attached here | |
| Part | | arm- and Commercial Fishing-Related Property You Own or Have an Interest In. interest in farmland, list it in Part 1. | |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ✓ No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured claims or exemptions |
| 47. | | | |
| | Examples: Livestock, pou | ıltry, farm-raised fish | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |

| Deb | tor 1 Denise Case 1 | <u> 16-07160</u> | MDoc 1 Middle Name | Filed 03/01/16 Document | Entered 03/ Page 19 of 7 | 01/16 /147:38: <u>44</u> 0 | Desc M | <u>lain</u> |
|--------------|--|--------------------------|-----------------------|----------------------------|-----------------------------|--------------------------------------|--------|--------------|
| 48. | Crops-either growin | g or harvested | | Boodinone | 1 490 10 01 1 | | | |
| | ✓ No | | | | | | | |
| | Yes. Describe | | | | | | | |
| 49. | Farm and fishing eq | uipment, imple | ements, mach | inery, fixtures, and tools | s of trade | | | |
| | ✓ No | | | | | | | |
| | Yes. Describe | | | | | | | |
| 50. | Farm and fishing sup | oplies, chemica | als, and feed | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Describe | | | | | | | |
| 51. | Any farm- and comm Examples: Livestock, p | | | ty you did not already li | st | | | |
| | ✓ No | | | | | | | |
| | Yes. Describe | | | | | | | |
| | | | | | | | | |
| | | - | | 6, including any entries | | | - | |
| | | | | | | | | |
| | | | | | | | | |
| Part | | | | ave an Interest in T | hat You Did Not | List Above | | |
| 53. | Do you have other pr Examples: Season ticke | | | not already list? | | | | |
| | ✓ No | • | | | | | | |
| | Yes. Give specific | | | | | | - | |
| | information | | | | | | - | |
| | | | | | | | | |
| 54 A | dd the dellar value of | all of your optr | ice from Part | 7 Write that number he | ro | | | |
| 54. A | du trie dollar value or | an or your entr | ies iroin Part | 7. Write that number he | re | | | |
| | | | | | | | | |
| Part | 8: List the Totals | of Each Pa | rt of this F | orm | | | | |
| | | | | | | _ | | |
| 55. F | -art 1: 10tal real estate | ;, iiiie | | | | ▶ | | |
| 1 | oart 2 total vehicles, lii | | | | | | | |
| 57. P | art 3: Total personal a | nd household | items, line 15 | \$1400.00 | 0 | | | |
| 58. P | art 4: Total financial a | ssets, line 36 | | \$22301.0 | 00 | | | |
| 59. F | Part 5: Total business- | related proper | ty, line 45 | | | | | |
| 60. F | Part 6: Total farm- and | fishing-relate | d property, lir | ne 52 | | | | |
| 61. F | Part 7: Total other pro | perty not listed | I, line 54 | | | | | |
| 62. 1 | Total personal propert | y. Add lines 56 t | hrough 61 | \$23701.0 | 00 | | | + \$23701.00 |
| | | | | , , , | | Copy personal property to | otal ▶ | · - |
| | | | | | | | | \$23701.00 |
| 63. T | otal of all property on | Schedule A/B. | Add line 55 + | line 62 | | | | |

| Filli | n this inform | Case 16-07160 ation to identify your case: | Doc 1 Filed 03 | 8/01/16 Entered 0.3/0 | 1/16 17:38:44 | Desc Main |
|-------------------------------------|---|---|--|--|---|---|
| | tor 1 | Denise | М | Gordon | | |
| | tor 2 | First Name | Middle Name | Last Name | | |
| (Spo | ouse, if filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Ba | inkruptcy Court for the: | Northern | District of Illinois | | |
| | e number nown) | | | (State) | | |
| Of | ficial F | orm 106C | | | 7 | Check if this is a amended filing |
| Sc | hedul | C: The Prop | erty You Clain | n as Exempt | | 12/1 |
| s to exer ece exer orop | o state a simpted up vive certa inption of perty is discounting. It is lident Which set You ar | pecific dollar amour to the amount of an in benefits, and tax-100% of fair market etermined to exceed the Property You of exemptions are you ce claiming state and federal e claiming federal exemptions. | at as exempt. Alternative applicable statutory exempt retirement fur value under a law that that amount, your exclaim as Exempt laiming? Check one only, evenonbankruptcy exemptions. 1 u.S.C. § 522(b)(2) | ively, you may claim the fix limit. Some exemptions and a may be unlimited in at limits the exemption to temption would be limited then if your spouse is filing with you. | ull fair market value—such as those for dollar amount. How a particular dollar is to the applicable s | r health aids, rights to wever, if you claim an amount and the value of the |
| | | | nd line Current value of | Amount of the exemption yo | | cific laws that allow exemption |
| | | lle A/B that lists this prop | | Check only one box for each ex | | Sine laws trial allow exemption |
| | | | Copy the value from Schedule A/B | ŕ | , | |
| | Brief | | #4 000 00 | _ | | 735 ILCS 5/12-1001(b) |
| | description Line from | PNC | \$1,600.00 | \$1,600.0 | | |
| | Schedule A | /B: <u>17</u> | | 100% of fair market value, using applicable statutory limit | up to any | |
| | Brief | . Hood Frankting | \$600.00 | | | 735 ILCS 5/12-1001(b) |
| | description Line from Schedule A | | φοσσ.σσ | \$600.00 100% of fair market value, u applicable statutory limit | | |
| _ | | | | ., | | |
| 3. | • | • | nption of more than \$155,67 every 3 years after that for cas | 75? ses filed on or after the date of adjus | stment.) | |
| | √ No | | | | | |
| | Yes. D | id you acquire the property | covered by the exemption with | nin 1,215 days before you filed this o | ase? | |

No Yes

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| • | on of the property and line /B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|-------------------------|--|---|--|------------------------------------|
| Brief description: | Used Clothing | \$400.00 | \$400.00 | 735 ILCS 5/12-1001(a) |
| Line from Schedule A/B: | 11 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Used Electronics | \$400.00 | \$400.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Pension with CPS | \$20,000.00 | 7 | 735 ILCS 5/12-1006 |
| Line from Schedule A/B: | 21 | | \$20,000.00 100% of fair market value, up to any applicable statutory limit | <u> </u> |
| Brief description: | PNC Bank | \$701.00 | \$701.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 17 | | 100% of fair market value, up to any applicable statutory limit | |

| Fill in this informa | Case 16-07160 ation to identify your case: | Doc 1 Filed (| 03/01/16 | Entered 03/01/ | 16 17:38:44 | Desc Main | |
|---------------------------------|---|---------------------------------|--------------------|-----------------------------|---|---|------------------------------------|
| Debtor 1 | Denise First Name | M Middle Name | Gordor Last Na | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Na | ame | | | |
| | nkruptcy Court for the: N | Northern | District of Illi | nois state) | | | |
| Case number (If known) | - | | | | | _ | |
| Official F | orm 106D | | | | | | eck if this is and ended filing |
| Schedu | le D: Credito | rs Who Hav | e Clain | ns Secured | by Proper | rty | 12/1 |
| correct inform | ete and accurate as p nation. If more space top of any additional | e is needed, copy t | he Addition | al Page, fill it out, r | number the entrie | · - | |
| ✓ No. Ch | ditors have claims secured neck this box and submit this Il in all of the information bel | form to the court with you | r other schedules | s. You have nothing else to | o report on this form. | | |
| Part 1: List A | All Secured Claims | | | | | | |
| claim. If mor | ured claims. If a creditor has te than one creditor has a pa the claims in alphabetical c | articular claim, list the other | er creditors in Pa | urt 2. As much as | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

| Fill in this informa | Case 16-07160 ation to identify your case: | Doc 1 File | d 0.3/01/16 Entered | 03/01/16 17:38:4 | 4 Desc | Main | |
|---|---|--|---|---------------------------------|-------------------------------|-----------------|--------------------|
| Debtor 1 Debtor 2 | Denise First Name | M Middle Name | Gordon Last Name | _ | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ | | | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois (State) | — | | | |
| Case number (If known) | | | | <u> </u> | | | |
| | orm 106E/F | | | | Chec | k if this is an | amended filing |
| Schedu | le E/F: Cred | litors Who | Have Unsecur | ed Claims | | | 12/15 |
| Part 1: List A 1. Do any cre No. Go Yes. 2. List all of y identify wha possible, list | e left. Attach the Continua All of Your PRIORITY editors have priority unsec to to Part 2. | Unsecured Clain cured claims against laims. If a creditor has n has both priority and order according to the | | pages, write your name a | nd case numl tely for each cl | aim. For eac | h claim listed, |
| (For an exp | planation of each type of clai | im, see the instructions | s for this form in the instruction book | et.) | Total claim | Priority amount | Nonpriority amount |
| Priority Cree P.O. Box 734 Number Philadelphia City | Street | 19101 Zip Code | Last 4 digits of account number. When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured c | n/a n is: Check all that apply. | \$3,500.00 | \$3,500.00 | \$0.00 |

Filed 03:401:41.6 Entered 03:401:41.6 (A-7::38:44 Desc Main Denise Case 16-07160 MDoc 1 Debtor 1 Document Page 24 of 70 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 CAVALRY PORTFOLIO SERV \$3,765.00 Last 4 digits of account number 1814 Nonpriority Creditor's Name 4050 E CÓTTON CENTER BLV When was the debt incurred? 3/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **PHOENIX** Arizona 85040 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.2 CCI \$427.00 4908 Last 4 digits of account number Nonpriority Creditor's Name 501 Greene Street # 302 When was the debt incurred? 10/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30901 Georgia Augusta Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 CHASE \$3,674.00 Last 4 digits of account number 0234 Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? 8/1/1995 Street Number As of the date you file, the claim is: Check all that apply. Contingent Wilmington Delaware 19850 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed V Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset?

✓ No Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.4 | CITIBANK N A | Last 4 digits of account number | \$9,522.62 |
| | Nonpriority Creditor's Name 701 E 60TH ST N | When was the debt incurred? | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | SIOUX FALLS South Dakota 57104 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify Judgment 2011 M1 129478 | |
| | No | | |
| | Yes | | |
| 4.5 | DELL FINANCIAL SERVICES INC Nonpriority Creditor's Name | Last 4 digits of account number | \$2,000.00 |
| | 12234 N Interstate 35 Frontage Rd | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Austin Texas 78753 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify debt | |
| | Is the claim subject to offset? | Other. Specify | |
| | ☐ Yes | | |
| 4.6 | ENHANCED RECOVERY CO L | | \$391.00 |
| | Nonpriority Creditor's Name | Last 4 digits of account number 3501 | Ψοσ 1.00 |
| | 8014 BAYBERRY RD Number Street | When was the debt incurred? 12/1/2015 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | JACKSONVILLE Florida 32256 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ✓ No | | |
| | Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning v | vith 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|--|-------------|
| 4.7 | ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street | Last 4 digits of account number 1439 When was the debt incurred? 6/1/2015 As of the date you file, the claim is: Check all that apply. | \$140.00 |
| | JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| 4.8 | Internal Revenue Service Nonpriority Creditor's Name P.O. Box 7346 Number Street Philadelphia Pennsylvania 19101 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Last 4 digits of account number When was the debt incurred? 12/31/2008 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$3,500.00 |
| 4.9 | Internal Revenue Service Nonpriority Creditor's Name P.O. Box 7346 Number Street Philadelphia Pennsylvania 19101 City State Zip Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes | Last 4 digits of account number When was the debt incurred? 12/31/2009 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | \$3,500.00 |

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First Name Document Page 27 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|------|---|---|-------------|
| 4.10 | Internal Revenue Service | Last 4 digits of account number | \$3,500.00 |
| | Nonpriority Creditor's Name P.O. Box 7346 | When was the debt incurred? 12/31/2010 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Philadelphia Pennsylvania 19101 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | | |
| | Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.11 | MERCHANTS CREDIT GUIDE | Last 4 digits of account number 2963 | \$347.00 |
| | Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 | When was the debt incurred? 7/1/2011 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60606 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | _ | |
| | Yes | | |
| 4.12 | MERCHANTS CREDIT GUIDE | — Last 4 digits of account number 2962 | \$134.00 |
| | Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 | When was the debt incurred? 7/1/2011 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60606 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | _ | |
| | Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

| 4.13 | MERCHANTS CREDIT GUIDE | Nonpriority Creditor's Name | 223 W JACKSON BLVD # 700 | When was the debt incurred? | 7/1/2011 |
| Number | Street | As of the date you file, the claim is: Check all that apply.
| Chicago | Illinois | 60606

| 4 4 2 N | MERCHANTS CREDIT GUIDE | | ФЕБ 00 |
|----------|---|---|------------|
| | Nonpriority Creditor's Name | Last 4 digits of account number 4947 | \$55.00 |
| | 23 W JACKSON BLVD # 700 | When was the debt incurred? 7/1/2011 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| _ | | Contingent | |
| | Chicago Illinois 60606 | | |
| | City State Zip Code | Unliquidated | |
| / | Nho incurred the debt? Check one. ✓ Debtor 1 only | Disputed | |
| Ľ | ≟ | Type of NONPRIORITY unsecured claim: | |
| L | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | s the claim subject to offset? | ✓ Other. Specify | |
| [| ✓ No | | |
| Г | Yes | | |
| 444 | | | *** |
| | PORTFOLIO RECOVERY ASS Nonpriority Creditor's Name | Last 4 digits of account number 5402 | \$2,342.00 |
| | 20 CORPORATE BLVD STE 1 | When was the debt incurred? 6/1/2014 | |
| ١ | Number Street | As of the data way file the plains in Charle all that and | |
| _ | | As of the date you file, the claim is: Check all that apply. | |
| N | NORFOLK Virginia 23502 | Contingent | |
| _ | City State Zip Code | Unliquidated Unliquidated | |
| <u>\</u> | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| Γ | Debtor 2 only | | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | |
| į | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Ī | s the claim subject to offset? | ✓ Other. Specify | |
| Į. | ✓ No | <u> </u> | |
| ř | = | | |
| | Yes | | |
| 4.15 F | PORTFOLIO RECOVERY ASS | Last 4 digits of account number 5623 | \$1,779.00 |
| | Nonpriority Creditor's Name 20 CORPORATE BLVD STE 1 | When was the debt incurred? 1/1/2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| _ | IODEOLK Virginia 00500 | Contingent | |
| _ | NORFOLK Virginia 23502 Dity State Zip Code | Unliquidated | |
| | Nho incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Ė | Debtor 1 and Debtor 2 only | Student loans | |
| Ļ | ≟ | Obligations arising out of a separation agreement or divorce that | |
| Ļ | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | s the claim subject to offset? | ✓ Other. Specify | |
| [| ✓ No | | |
| Ī | Ves | | |

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Page 29 Volum NONPRIORITY Unsequent Claims Continuation Page 39 of 70

| Pant 24 Your NONE | -KIOKITT UIISECUTE | ed Claims - Conti | inuation Fage |
|---|---|---------------------|--|
| After listing any | entries on this page, nu | umber them beginnin | ng with 4.5, followed by 4.6, and so forth. Total claim |
| 4.16 Portfolio Recoven Nonpriority Credit PO Bo x12914 Number Stre | tor's Name | | Last 4 digits of account number\$1,658.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. |
| Debtor 1 only Debtor 2 only Debtor 1 and At least one o | Debtor 2 only of the debtors and another s claim relates to a com | | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify judgment 2013 m1 17378 |

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Part 3: List Others to Be Notified About a Debt That You Already Listed

| Offices of Michael | I D. Fine | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|--------------------|-----------|----------|--|
| 131 S. Dearborn | | | Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | Illinois | 60603 | Last 4 digits of account number 0234 |
| City | State | Zip Code | |
| BLITT & GAINES | PC | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 661 GLENN AVE | | | Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Wheeling | Illinois | 60090 | Last 4 digits of account number |
| City | State | Zip Code | |
| Blitt & Gaines | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 661 Glenn Ave | | | Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Wheeling | Illinois | 60090 | Last 4 digits of account number |
| City | State | Zip Code | <u> </u> |

Debtor 1 Denise Case 16-07160 MDoc 1 Filed 03401416 Entered 03401416 (1474)38:44 Desc Main First Name Document Page 31 of 70 Add the Amounts for Each Type of Unsecured Claim

| | mounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. nounts for each type of unsecured claim. |
|--------------------------|--|
| | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. 6a. \$0.00 |
| nom r art r | 6b. Taxes and certain other debts you owe the 6b. \$3,500.00 |
| | 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that 6d. \$0.00 |
| | 6e. Total. Add lines 6a through 6d. 6e. \$3,500.00 |
| | Total claims |
| Total claims from Part 2 | 6f. Student loans 6f. \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce 6g. \$0.00 that you did not report as priority claims |
| | 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$0.00 debts |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. \$36,734.62 amount here. |
| | 6j. Total. Add lines 6f through 6i. 6j. \$36,734.62 |

| | Ca | se 16-0716 | 0 Doc 1 | Filed 03 | 3/01/16 | Ente | red 03/ | n1/16 1 | 7.38.44 | Desc | : Main | |
|---------------------|---|--|--|---------------------------|----------------------|----------------------------------|--------------|--|----------------------------|-------------|---------|-------------------------------------|
| Fill in thi | | to identify your cas | | 1 111 11 17 | 77.7.7.7.7.7 | | | D1/10 1 | 7.50.44 | DC30 | iviaiii | |
| Debtor 1 | | | М | | Gordo | | | | | | | |
| | | Name | Middl | le Name | Last N | lame | | | | | | |
| Debtor 2 (Spouse | $\frac{2}{1}$, if filing) First | Name | Middl | le Name | Last N | lame | | | | | | |
| United S | States Bankrup | otcy Court for the: | Northern | | District of III | | | | | | | |
| Case nu | ımber | | | | (\$ | State) | | | | | | |
| (If known | n) | | | | | | | | | | | |
| Offic | ial For | m 106G | | | | | | | | | | Check if this is a mended filing |
| Sche | edule G | S: Execut | ory Con | tracts a | and Un | ехрі | red L | eases | | | | 12/1 |
| 1. Do | mber (if know you have a No. Check this Yes. Fill in all c | y the additional property. Any executory box and file this for the information back person or core. | contracts or orm with the court elow even if the c | unexpired with your other | leases? schedules. Y | ∕ou have r I on <i>Sche</i> d | nothing else | to report on | this form. ial Form 106 | A/B). | , , | |
| | | I phone). See the | | | | | | | | | | -, - , |
| | Person or co | mpany with who | m you have the | contract or le | ase | | | State wha | t the contra | ct or lease | is for | |
| N | elmont Cragin ame 045 W Grand | Senior Suites | | | | _ | | Residential Debtor is Lo One year le | , | | | |
| N | umber | Street | | | | _ | | | | | | |
| _ | hicago | III | linois | 60639 | | | | | | | | |
| С | ity | S | tate | Zip Cod | е | | | | | | | |

| | | Case 16-0716 | 0 Doo 1 Filad 0 | 2/01/16 Entere | d 03/01/16 17:38:44 | Doco Main |
|---------|--|---|--|-----------------------------|-------------------------------------|--|
| Fill in | this inform | ation to identify your case | | 5/01/10 Fillere | 103/01/10 17.30.44 | Desc Main |
| Debt | or 1 | Denise | M | Gordon | | |
| Debt | or 2 | First Name | Middle Name | Last Name | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | |
| Unite | d States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| | number | | | (State) | | |
| (If kno | <u>, </u> | orm 106H | | | | Check if this is a amended filing |
| Scł | nedul | e H: Your Co | odebtors | | | 12/1: |
| 2. V | No Yes Within the | last 8 years, have you | ou are filing a joint case, do not lived in a community proper erto Rico, Texas, Washington, | ty state or territory? (Con | | ies include Arizona, California, Idaho, |
| | No. Go | o to line 3. id your spouse, former sp | pouse, or legal equivalent live v | , | | |
| | | | tate or territory did you live? | | Fill in the name and current addres | ss of that person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | <u> </u> | |
| | | Number Street | | | <u> </u> | |
| | | City | State | Zip Code | | |
| а | s a codeb | tor only if that person i | s a guarantor or cosigner. I | /lake sure you have listed | | the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> blumn 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

| Fill in this | s information to identify | your case: | | | 1/16 17 | :38:44 | Desc Mair | า |
|-------------------------|--|------------------------------------|----------------------|----------------------|-----------------------|----------------|-------------------------------------|-----------------------------------|
| Debtor 1 | Denise | M | Gordon | ge o oı | 7-0 | | | |
| Deniol I | First Name | Middle Name | Last Name |) | - | | | |
| Debtor 2 | | | | | | Check if this | is: | |
| | filing) First Name | Middle Name | Last Name |) | - | An ame | nded filing | |
| United Stat | es Bankruptcy Court for the: | Northern | District of Illinois | | - | | ement showing poss as of the follow | ost-petition chapter ing date: |
| Case numb (If known) | per | | (01010 | , | | MM / DI | D/YYYY | |
| Officia | al Form 106I | | | | | | | |
| Sched | lule I: Your Inc | ome | | | | | | 12/ |
| | Describe Employme | se number (if known). A | nswer every | question. | | | | |
| | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | | |
| | information. | Employment status | ✓ Employed | | | ☐ Employed | | |
| | If you have more than one | | Not Employed | | | ☐ Not Employed | | |
| | job, attach a separate page with | | I Not Employ | reu | | Not En | ipioyea | |
| | information about additional | Occupation | Teacher | | | | | |
| | employers. | Employer's name | CPS | | | | | |
| | Include part time, seasonal, | Employer's address | 125 S Clark | | | | | |
| | or self-employed work. | p.oyo. o auaooo | Number Street | | | Number Stre | et | |
| | | | | | | | | |
| | Occupation may include student | | | | | | | |
| | or homemaker, if it applies. | | | | 2222 | | | |
| | | | Chicago City | Illinois State | Zip Code | City | State | Zip Code |
| | | How long employed there? | 5 months | | Zip 0000 | | | |
| Part 2: | Give Details About I | | | | | | | |
| Estimate are separa | | date you file this form. If you ha | ave nothing to rep | ort for any line | e, write \$0 in the s | space. Include | e your non-filing s | pouse unless you |
| | our non-filing spouse have mo e sheet to this form. | re than one employer, combine th | ne information for | all employers | for that person or | | | nore space, attach |
| | | | | For | Debtor 1 | For Debte | | |
| | monthly gross wages, salar actions.) If not paid monthly, ca | 2. | \$2,374.62 | | | | | |
| 3. Estir | 3. Estimate and list monthly overtime pay. | | | | + \$0.00 | | | |

4. Calculate gross income. Add line 2 + line 3.

\$2,374.62

Debtor 1 Denise Case 16-07160 M Doc 1 Filed 03/04/16 Entered @34011/116 117:38:44 Desc Main Documentame Page 35 of 70 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$2,374.62 5. List all payroll deductions: \$464.08 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$63.94 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$72.95 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$68.88 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$669.85 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,704.78 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 \$1,704.78 10. Calculate monthly income. Add line 7 + line 9. \$1,704.78 10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$1,704.78 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

| First Name | - :::::::::::::::::::::::::::::::::::: | Case 16-0716 | | 3/01/16 Entered 03/ | 01/16 17:38:44 | Desc Ma | in |
|--|---|-----------------------------|---------------------------------------|---|---|-------------------|-----------------|
| Pirst Name | Fill in this infor | mation to identify your cas | e: | U | | | |
| Check if this is: Spoose, if filing First Name | Debtor 1 | Denise | M | Gordon | | | |
| Case number Minds East Name Last Name Last Name An amended filing A supplement showing post-petition chapter 13 expenses as of the following date: MIN / DD / YYYYY | | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: Northern | Debtor 2 | a) = | | | Check if this is: | | |
| Case number (If known) Comparison of the following date: | (Spouse, if filin | g) First Name | Middle Name | Last Name | An amended filin | ·g | |
| Case number (If Innown) Difficial Form 106J Schedule J: Your Expenses 12/15 Schedule J: Your Space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. Schedule Yes Describe Your Household 1.5 this a joint case? Wes. Describe Your Household 1.5 this a joint case? Wes. Describe Your Household 1.5 this a joint case? Wes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No | United States E | Bankruptcy Court for the: | Northern | District of Illinois | A supplement sh | owing post-petit | tion chapter 13 |
| Difficial Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. 2art 12: Describe Your Household 1. Is this a joint case? No. Go to line 2 Yes. Debtor 2 live in a separate household? No. Go to line 2 Do you have dependents? No. Do not list Debtor 1 and each dependent live each dependent live each dependent live expenses include expenses include expenses include expenses include expenses include expenses of people other than your dependents? Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your ongoing Monthly Expenses for you know the value of such assistance and have included it on Schedule 1: Your Income (Official Form 8 1061.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 14. Real estate taxes 4a. \$0.00 4b. \$0.00 | | | | (State) | expenses as of the | ne following date | e: |
| Difficial Form 106J Schedule J: Your Expenses as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number I known). Answer every question. Secrible Your Household | | - | | | | | |
| e as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number 1 known). Answer every question. Part s: Describe Your Household 1. Is this a joint case? No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and each dependent Debtor 1 or Debtor 2 age with you? 3. Do your expenses include expenses of people other than yourself and your yes dependents? Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses for your residence. Include first mortgage payments and a supplement and A. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | | | | | | 1 | |
| e as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number 1 known). Answer every question. Part s: Describe Your Household 1. Is this a joint case? No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and each dependent Debtor 1 or Debtor 2 age with you? 3. Do your expenses include expenses of people other than yourself and your yes dependents? Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses for your residence. Include first mortgage payments and a supplement and A. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | Official | Form 106J | | | | | |
| The asc complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct formation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (known). Answer every question. Anti- Describe Your Household | | | | | | | |
| Incomation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number if known). Answer every question. Part I: Describe Your Household 1. Is this a joint case? No. Go to line 2 | Schedu | le J: Your Ex | penses | | | | 12/15 |
| 1. Is this a joint case? No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Yes. Fill out this information for each dependent Pebtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2 Yes. Fill out this information for each dependent Pebtor 2 Pesting 2 No | nformation. If | more space is needed, | | | | - | mber |
| No. Go to line 2 Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. 3. Do your expenses include expenses for Up No Hand your dependent of Pess No No Hand Yes. Fill out this information for Debtor 1 or Debtor 2. 2. Estimate Your Ongoing Monthly Expenses Estimate Your ongoing Monthly E | Part 1: Des | cribe Your Househo | old | | | | |
| Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Pebtor 2 meach dependent Pebtor 1 or Debtor 1 or Debtor 2 pependent's relationship to Dependent's age with you? 3. Do your expenses include expenses of people other than your dependents? Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence, Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance | 1. Is this a joi | nt case? | | | | | |
| No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Yes. Fill out this information for each dependent Pendent's relationship to Debtor 1 and Debtor 2. 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes 2. Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4. If not included in line 4: 4. Expenses the form the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the form the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4. Expenses the first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: | ✓ No. Go | to line 2 | | | | | |
| Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Yes. Fill out this information for Dependent's relationship to Dependent's Does dependent live Debtor 1 or Debtor 2 age with you? 3. Do your expenses include expenses of people other than Yes | Yes. D | oes Debtor 2 live in a se | eparate household? | | | | |
| 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Dependent Debtor 1 or Debtor 2 Dependent's relationship to Debtor 2. Does dependent live each dependent Debtor 1 or Debtor 2 Dependent's age with you? 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance | Г | No | | | | | |
| Do not list Debtor 1 and Debtor 2. Dependent Debtor 2 Dependent's relationship to Debtor 2. Dependent's age with you? 3. Do your expenses include expenses of people other than yours dependents? Destinate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. S0.00 4b. \$0.00 | Ī | Yes. Debtor 2 must file | Official Forms 106J-2, Expens | ses for Separate Household of Debt | or 2. | | |
| Do not list Debtor 1 and Debtor 2. Dependent Debtor 2 Dependent's relationship to Debtor 2. Dependent's age with you? 3. Do your expenses include expenses of people other than yours dependents? Destinate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. S0.00 4b. \$0.00 | 2. Do vou hav | ve dependents? | lo | | | | |
| Debtor 2. each dependent Debtor 1 or Debtor 2 age with you? 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. S0.00 | - | | | Danandant's relationship to | Donandant's | Door done | andont live |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | | | | | • | • | endent live |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | expenses of than yourself an | of people other V | | | , in the second | | |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | Part 2: Esti | mate Your Ongoing | Monthly Expenses | | | | |
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | expenses as | of a date after the bankr | · · · · · · · · · · · · · · · · · · · | · . · · · · · · · · · · · · · · · · · · | | | e |
| any rent for the ground or lot. 4. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | | | | | | ١ | Your expenses |
| 4a. Real estate taxes 4a. \$0.00 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | | | enses for your residence. Ind | clude first mortgage payments and | | 4. | \$812.00 |
| 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | If not incl | luded in line 4: | | | | | |
| 4b. Property, homeowner's, or renter's insurance 4b. \$0.00 | 4a. Real e | state taxes | | | | 4a | \$0.00 |
| As Home maintenance reneir and unknown surranges | 4b. Proper | rty, homeowner's, or rente | r's insurance | | | | |
| | 4c. Home | maintenance, repair, and u | pkeep expenses | | | | |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Pebtor 1 Denise Case 16-07160 MDoc 1 Filed 03/01/16 Entered 03/01/16 Marxi38:44 Desc Main
First Name Document Page 37 of 70

Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$75.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$400.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$150.00 9. 10. Personal care products and services \$150.00 10. 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$150.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$0.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1 | Denise C 8 | ase 16-07160 | м Дос 1 | Filed 03:04:16 | Entered 03/01/16 /147:38:44 | Desc Main | |
|------------------|----------------|--------------------------|------------------|--|-----------------------------|-----------|------------|
| | First Name | | Middle Name | Document notice and the property of the proper | Page 38 of 70 | | |
| 21.Other | Specify: | | | | | 21 | \$0.00 |
| | | | | | | | |
| 22. Calcu | ılate your m | nonthly expenses. | | | | | \$1,787.00 |
| 22a. A | Add lines 4 th | rough 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 | (monthly expenses for | Debtor 2), if an | y, from Official Form 106J- | -2 | | \$1,787.00 |
| 22c. A | Add line 22a a | and 22b. The result is y | our monthly ex | rpenses. | | 22. | |
| 23.Calcu | late your m | onthly net income. | | | | - | |
| 23a. C | Copy line 12 | (your combined monthl | ly income) from | Schedule I. | | 23a | \$1,704.78 |
| 23b. C | Copy your mo | onthly expenses from lin | ne 22 above. | | | 23b | \$1,787.00 |
| 23c. S | Subtract your | monthly expenses fron | n your monthly | income. | | | (\$82.22) |
| - | The result is | your monthly net incor | me. | | | 23c | |
| 24. Do yo | ou expect a | n increase or decreas | se in your exp | enses within the year aft | er you file this form? | | |
| | | | | r loan within the year or do y of a modification to the term | | | |
| ✓ 1 | No | | | | | | |
| | Yes | | | | | | _ |
| | Exp | olain here: | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| | Case 16-07160 | Doc 1 Filed 0 | 3/01/16 | <u>d 03/0</u> 1/16 17:38:44 | Desc Main |
|------------------------------|---|---------------------------|--|--|---|
| Fill in this info | rmation to identify your case: | | | 17.00.44 | Desc Main |
| Debtor 1 | Denise | М | Gordon | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if fili | ng) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official | Form 106Dec | | | | Check if this is an amended filing |
| Declara | ation About an | Individual De | btor's Sched | ules | 12/1 |
| If two married | I people are filing together, | both are equally responsi | ble for supplying correct | t information. | |
| | aud in connection with a ba | | | | ing property, or obtaining money or rs, or both. 18 U.S.C. §§ 152, 1341, |
| Did you | pay or agree to pay someo | ne who is NOT an attorney | to help you fill out bank | ruptcy forms? | |
| ✓ No | | | | | |
| Yes | Name of person | | Attach Bankruptcy Signature (Official | r Petition Preparer's Notice, Declar Form 119). | ation, and |
| | | | | | |
| | enalty of perjury, I declare t y are true and correct. | hat I have read the summa | ry and schedules filed w | rith this declaration and | |
| 🗶 /s/ Deni | ise Gordon | | × | | |
| Signature | e of Debtor 1 | | Signatu | re of Debtor 2 | |
| Date 3/ 1 | /2016 | | Date | | |
| M | M/DD/YYYY | | Ī | MM/DD/YYYY | |

| Fill in this | Case 1 information to ider | 16-07160 htify your case: | Doc 1 | Filed | 03/01/16 | Entered 03 | <u>/0</u> 1/16 17:3 | 8:44 | Desc Main |
|---------------------|--|------------------------------|----------------------|-----------|-------------------------|------------------|---------------------|-------------|--|
| Debtor 1 | Denise | ary your oaco. | М | | Gordon | Ü | | | |
| | First Name | 9 | Middle N | Name | Last Nan | ne | | | |
| Debtor 2 Spouse, | if filing) First Name | ə | Middle N | Name | Last Nan | ne | | | |
| Jnited St | tates Bankruptcy Co | ourt for the: | Northern | | District of Illing | ois | | | |
| Case nur | | | | | (Sta | te) | | | |
| lf known) | | | | | | | | | Check if this is a |
|)ffici | al Form 1 | 107 | | | | | | | amended filing |
| tate | ment of F | :inancia | al Affairs | for | Individua | Is Filing | for Bank | ruptc | y 12/1 |
| | | | | | | | | | correct information. If more |
| ace is r | needed, attach a s | eparate sheet | to this form. On | the top | o of any additional | pages, write you | ır name and cas | e number (i | f known). Answer every question |
| Part 1: | Give Details A | bout Your I | Marital Status | and \ | Where You Live | ed Before | | | |
| I. W | hat is your currer | nt marital stat | us? | | | | | | |
| г | Married | | | | | | | | |
| <u> </u> | Not married | | | | | | | | |
| . Du | uring the last 3 yea | ars, have you | lived anywhere o | ther th | an where you live I | now? | | | |
| _ | 7 No | | · | | • | | | | |
| | ₫ | e places you liv | ed in the last 3 yea | ars. Do r | not include where yo | u live now. | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Debtor 1: | | | | s Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | Debtor 1: | | | Date | | | | | there |
| | Debtor 1: | | | | | Debtor 2: | Debtor 1 | | |
| | 5418 W Congress | s Pkwy | | there | | Same as I | | | there |
| | | s Pkwy | | there | | | | | there Same as Debtor 1 |
| | 5418 W Congress Number Street | | 60644 | there | 12/1/2014 | Same as I | | | there Same as Debtor 1 From |
| | 5418 W Congress | s Pkwy Illinois State | 60644 Zip Code | there | 12/1/2014 | Same as I | | Zip Code | there Same as Debtor 1 From To |
| | 5418 W Congress Number Street Chicago | Illinois | | there | 12/1/2014 | Same as I | et State | Zip Code | there Same as Debtor 1 From To |
| | 5418 W Congress Number Street Chicago | Illinois | | there | 12/1/2014 12/28/2015 | Same as I | et State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| | 5418 W Congress Number Street Chicago City | Illinois | | there | 12/1/2014 12/28/2015 | Same as I | et State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From From From From From From |
| | 5418 W Congress Number Street Chicago City 4119 W 176th Pl | Illinois | | there | 12/1/2014 12/28/2015 | Same as I | et State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| | 5418 W Congress Number Street Chicago City 4119 W 176th Pl | Illinois | | there | 12/1/2014 12/28/2015 | Same as I | et State Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From To To To |

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Part 2: Explain the Sources of Your Income

| 4. | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. | | | | | | | | |
|----|---|--|--|--|---|--|--|--|--|
| | | Debtor 1 | | Debtor 2 | | | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$4636.96 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | For last calendar year: (January 1 to December 31, 2015) YYYY | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$22075.42 | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | | | | | |
| | For the calendar year before that: (January 1 to December 31, | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$8427.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details. | ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1. | income are alimony; child su from lawsuits; royalties; and | gambling and lottery winnings. | | | | | |
| | | Debtor 1 | | Debtor 2 | | | | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | | | |
| | From January 1 of current year until the date you filed for bankruptcy: | | | | | | | | |
| | For last calendar year: (January 1 to December 31, | | | | | | | | |
| | For the calendar year before that: (January 1 to December 31, | | | | | | | | |

Debtor 1 Denise Case 16-07160 MDoc 1
First Name Middle Name Filed 03¢01d16 Entered 03d01d16 da7v38:44 Desc Main Documentement Page 42 of 70 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| Are eithe | er Debtor 1's o | r Debtor 2's d | ebts primarily con | sumer debts? | | | |
|-----------|-------------------------------|-----------------|---|------------------------------|--|-----------------------------|--|
| No. | | | or 2 has primarily c ehold purpose." | onsumer debts. Cons | umer debts are defined in 11 | U.S.C. § 101(8) as "incurre | ed by an individual primarily |
| | During the 90 o | days before you | u filed for bankruptcy, | did you pay any credito | r a total of \$6,225* or more? | | |
| | No. Go to | line 7. | | | | | |
| | tota | l amount you p | aid that creditor. Do | not include payments fo | more in one or more paymer r domestic support obligatio attorney for this bankruptcy o | ns, such as | |
| | * Subject to adj | ustment on 4/0 | 01/16 and every 3 yea | ars after that for cases fil | ed on or after the date of adj | ustment. | |
| ✓ Yes. | Debtor 1 or D | ebtor 2 or bo | th have primarily c | onsumer debts. | | | |
| | During the 90 c | days before you | u filed for bankruptcy, | did you pay any credito | r a total of \$600 or more? | | |
| | No. Go to | | | | | | |
| | that | creditor. Do no | ot include payments | | re and the total amount you p ligations, such as child supp Inkruptcy case. | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | editor's Name Imber Street | | | | - | ` | Mortgage Car Credit card Loan repayment Suppliers or |
| City | у | State | Zip Code | | | | vendors Other |
| Cre | editor's Name | | | | | | Mortgage Car |
| Nui | imber Street | | | | | | Credit card Loan repayment |
| City | у | State | Zip Code | | | | Suppliers or vendors Other |
| Cre | editor's Name | | | | | | Mortgage |
| Nui | mber Street | | | | | | Credit card |
| | | | | | | | Loan repayment |
| Cit | ·V | State | Zip Code | | | | Suppliers or vendors |
| 3.1. | ., | 2.0.0 | p 0000 | | | | Other |

Denise Case 16-07160 MDoc 1 Debtor 1 Document Page 43 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Denise Case 16-07160 MDoc 1 First Name Middle Name Filed 03¢01616 Entered 03601616 (147:38:44 Desc Main Documenter Page 44 of 70

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| lisputes. ✓ No | | | | | | | |
|----------------------------|-------------------------|----------|---|--|--------|----------|------------------------|
| Yes. Fill in the | e details. | | | | | | |
| | | Natu | re of the case | Court or age | ncy | | Status of the case |
| Case title | | | | | | | Pending |
| | | | | Court Name | | | On appeal |
| Case numb | per | | | Number Stree | et | | Concluded |
| - | | | | City | State | Zip Code | _ |
| Case title | | | | 2.9 | | | Pending |
| | | | | Court Name | | | On appeal |
| Case numb | per | | | Number Stree | et | | - Concluded |
| | | | | | | 7: 0 ! | _ |
| | | | | City | State | Zip Code | |
| | he information below. | | Describe the pro | operty | | Date | Value of the |
| | | | Describe the pro | operty | | Date | Value of the property |
| Creditor's | | | Describe the pro | pperty | | Date | |
| Creditor's I | | | Describe the pro | | | Date | |
| | | | _ | | | Date | |
| | Name | | Explain what ha | ppened repossessed. | | Date | |
| | Name | | Explain what ha Property was | ppened repossessed. repossessed. | | Date | |
| | Name | Zip Code | Explain what ha Property was Property was Property was | ppened repossessed. repossessed. | evied. | Date | |
| Number | Name Street | Zip Code | Explain what ha Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, or I | evied. | Date | |
| Number | Name Street State | Zip Code | Explain what ha Property was Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, or I | evied. | | property Value of the |
| Number | Name Street State | Zip Code | Explain what ha Property was Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, or l | evied. | | property Value of the |
| Number City Creditor's I | Name Street State | Zip Code | Explain what ha Property was Property was Property was Property was Describe the pro | ppened repossessed. foreclosed. garnished. attached, seized, or l | evied. | | property Value of the |
| Number City Creditor's I | Name Street State | Zip Code | Explain what ha Property was Property was Property was Property was Describe the pro Explain what ha | ppened repossessed. foreclosed. garnished. attached, seized, or l | evied. | | property Value of the |
| Number City Creditor's | Name Street State | Zip Code | Explain what ha Property was | ppened repossessed. foreclosed. garnished. attached, seized, or leperty ppened repossessed. foreclosed. | evied. | | property Value of the |
| Number City Creditor's | Name Street State | Zip Code | Explain what ha Property was Property was Property was Property was Explain what ha Property was Property was Property was Property was Property was | ppened repossessed. foreclosed. garnished. attached, seized, or leperty ppened repossessed. foreclosed. | | | property Value of the |

| Deb | tor 1 | | <u>d 03¢01ൾ16 Entered</u> 03/01ൾ16 <i>ଏକ</i> ଃ 38: ocum ଆଧାର Page 45 of 70 | 44 Desc | <u>Main</u> |
|------|----------|--|---|--------------------------|-------------------------|
| 11. | | nin 90 days before you filed for bankruptcy, did any ounts or refuse to make a payment because you owe | creditor, including a bank or financial institution, set of | ff any amounts fr | om your |
| | | No Yes. Fill in the details. | | | |
| | | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street | | 1 | |
| | | - Chiect | Last 4 digits of account number: XXXX- | | |
| | | City State Zip Code | | | |
| 12. | | in 1 year before you filed for bankruptcy, was any o iver, a custodian, or another official? | f your property in the possession of an assignee for th | e benefit of credi | tors, a court-appointed |
| | | No Yes | | | |
| Part | 5: | ist Certain Gifts and Contributions | | | |
| 13. | Wi | hin 2 years before you filed for bankruptcy, did you | give any gifts with a total value of more than \$600 per | person? | |
| | ✓ | No Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | | | |
| | | | | | |
| | | Number Street | | | |
| | | City State Zip Code Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |

| | | FIRST Name | r | /ilddie Name Do | ocument Page 46 of 70 | | |
|------|----------|---|------------------|---------------------|--|-----------------------------------|------------------------|
| 14. | With | nin 2 years before y | you filed for ba | | give any gifts or contributions with a total value of mor | e than \$600 to an | y charity? |
| | ✓ | No Yes. Fill in the detail | ls for each gift | or contribution. | | | |
| | _ | Gifts with a total v | - | | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| Part | 6. | City List Certain Los | State | Zip Code | | | |
| 15. | | | | kruptcy or since yo | ou filed for bankruptcy, did you lose anything because | of theft, fire, othe | r disaster, or |
| | _ | bling? No | | | | | |
| | Ħ | Yes. Fill in the detail | S. | | | | |
| | | Describe the prophow the loss occur | | ind | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending | Date of your loss | Value of property lost |
| | | | | | insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | | | | | |
| Part | 7: | List Certain Pay | ments or T | ransfers | | | |
| 16. | seek | ing bankruptcy or | preparing a ba | ankruptcy petition? | anyone else acting on your behalf pay or transfer any processing agencies for services required in your bankrupton | | ne you consulted about |
| | | No Yes. Fill in the detail | | | | , | |
| | <u>~</u> | res. I ili ili tile detail | 3. | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | | Semrad Law Firm - \$0.00 | 3/1/2016 | \$0.00 |
| | | Person Who Was P 20 South Clark Stre | | | | | |
| | | Number Street | 01 20111 1001 | | | | |
| | | Chicago | Illinois | 60606 | | | |
| | | City | State | Zip Code | | | |
| | | Email or website ad | Idress | | | | |
| | | Person Who Made t | the Payment, if | Not You | | 1 | |
| | | Person Who Was P | aid aid | | | | |
| | | Number Street | | | | | |
| | | City | State | Zip Code | | | |
| | | Email or website ad | Idress | | | | |
| | | Person Who Made t | the Payment, if | Not You | | | |
| | | | • • • • | | | 4 | |

Debtor 1 Denise Case 16-07160 MDoc 1 Filed 03/01/16 Entered 03/01/16 AA7:38:44 Desc Main

| Deb | tor 1 | Denise Case 16-07160 First Name | MDoc 1 Filed Middle Name Do | d 03#01/16 cum@ntme | Entered 03/01 Page 47 of 70 | uh166 (i1kn7;v38) | 44 Desc | <u>Main</u> | |
|-----|----------------|---|--|----------------------------------|--------------------------------|-------------------|-----------------------------------|-------------|------------------------|
| 17. | you | nin 1 year before you filed for b deal with your creditors or to m not include any payment or transfer | nake payments to you | r creditors? | ng on your behalf pay o | or transfer any p | property to anyor | ne who p | promised to help |
| | ✓ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and | d value of any property | transferred | Date payment or transfer was made | Amou | nt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18. | ordi: Inclu | hin 2 years before you filed for nary course of your business of ide both outright transfers and transfers that you have already listed of No Yes. Fill in the details. | or financial affairs? nsfers made as security | | | | | - | |
| | Ц | res. i iii iii ule detalis. | | Description and property transfe | | | property or paymebts paid in exch | | Date transfer was made |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| | | Person Who Received Transfer | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| 19. | (The | nin 10 years before you filed for ese are often called asset-protection | | transfer any prop | perty to a self-settled tru | ıst or similar de | evice of which yo | u are a l | peneficiary? |
| | Ц | Yes. Fill in the details. | | Description an | d value of the property | transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |
| | | | | | | | | | |

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Debtor 1 Denise Case 16-07160 MDoc 1 First Name Middle Name

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| 20. | or tra | in 1 year before you filed for bankruptcy, were a ansferred? de checking, savings, money market, or other financieratives, associations, and other financial institutions | al accounts; certificates of deposit; sh | | | |
|-----|----------|---|--|-----------------------------------|---|---|
| | | No Yes. Fill in the details. | | | | |
| | | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | — XXXX- | Checking Savings | | |
| | | Number Street | - | Money market Brokerage | | |
| | | City State Zip Code | _ | Other | | |
| | | Person Who Was Paid | — XXXX- | Checking Savings | | |
| | | Number Street | _ | Money market Brokerage Other | | |
| | | City State Zip Code | _ | Guici | | |
| 21. | | ou now have, or did you have within 1 year befo ables? | re you filed for bankruptcy, any sa | fe deposit box or other depositor | ry for securities, o | cash, or other |
| | | No Yes. Fill in the details. | | | | |
| | | | Who else had access to it? | Describe the contents | 5 | Do you still have it? |
| | | | Name | | | ☐ No ☐ Yes |
| | | | Number Street City State Zip | Code | | |
| | | City State Zip Code | , | | | |
| 22. | ✓ | you stored property in a storage unit or place on No Yes. Fill in the details. | other than your home within 1 year | r before you filed for bankruptcy | ? | |
| | | | Who else had access to it? | Describe the contents | S | Do you still have it? |
| | | Name of Storage Facility | Name | | | ☐ No ☐ Yes |
| | | | Number Street | | | L 199 |
| | | City State Zip Code | City State Zip | Code | | |

| Deb | otor 1 | First Name Middle Name | Docume | thit ^{me} Paç | ntered_03/0 ge 49 of 70 | hluhla6 ഷി-7ം:38: <u>44 Desc Mail</u> | <u>1</u> |
|------|----------|---|--------------------|------------------------|----------------------------|---|-----------------|
| Part | 9: | Identify Property You Hold or Contro | I for Someo | ne Else | | | |
| 23. | Do y | you hold or control any property that someone No Yes. Fill in the details. | e else owns? Ir | nclude any pro | perty you borro | wed from, are storing for, or hold in tru | st for someone. |
| | Ш | tes. Fill III the details. | Where is the | e property? | | Describe the contents | Value |
| | | Owner's Name | Number Stre | eet | | - | |
| | | Number Street | | | | - | |
| | | | _ | | | - | |
| | | | City _ | State | Zip Code | | |
| | | City State Zip Code | | | | | |
| Par | t 10: | Give Details About Environmental In | nformation | | | | |
| For | · | urpose of Part 10, the following definitions apply: | | | | | |
| | ha | nvironmental law means any federal, state, or loca azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear | nto the air, land, | soil, surface wa | iter, groundwater | | |
| | | ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo | • | vironmental law, | whether you now | own, operate, or utilize it | |
| | | azardous material means anything an environment xic substance, hazardous material, pollutant, conta | | | raste, hazardous s | substance, | |
| Rep | oort al | I notices, releases, and proceedings that you know | about, regardle | ss of when they | occurred. | | |
| 24 | Has | any governmental unit notified you that you r | mav be liable o | r notentially lia | able under or in | violation of an environmental law? | |
| | I | No | may so maste o | . potermany m | | violation of all official office and it | |
| | | Yes. Fill in the details. | | | | | |
| | | | Governmen | tal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Governmenta | al unit | | - | |
| | | Number Street | Number Stre | eet | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| 25. | Hav | e you notified any governmental unit of any re | elease of hazar | dous material | ? | | |
| | ✓ | No | | | | | |
| | | Yes. Fill in the details. | _ | | | | |
| | | | Governmen | tal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Governmenta | al unit | | - | |
| | | Number Street | Number Stre | eet | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | | | | | |
| | | | | | | | |

| Debtor | 1 | Denise Case 16-07160 First Name | | <u>led 03¢01/16 </u> | <u>Entered</u> | h16 Ar7;38: <u>44</u> | Desc Main |
|----------|------|---|--------------------------|---|-----------------------|-----------------------|---|
| 26. H | lav | e you been a party in any judic | ial or administrativ | e proceeding under an | y environmental law | ? Include settlements | and orders. |
| <u> </u> | 7 | No | | | | | |
| L | _ | Yes. Fill in the details. | , | Court or agency | | Nature of the case | Status of the |
| | | | · | odit of agency | | reactive of the case | case |
| | | Case title | | | | | Pending |
| | | | | Court Name | | | On appeal |
| | | | 1 | lumber Street | | | Concluded |
| | | Case number | | City State | Zip Code | | _ |
| Part 11 | 1: | Give Details About Your | Business or Co | onnections to Any | Business | | |
| 27. V | Vitl | nin 4 years before you filed for | bankruptcy, did yo | u own a business or ha | ive any of the follow | ing connections to an | y business? |
| | | A sole proprietor or self-emp | | | - | | • |
| | | A member of a limited liability | • | • | • | | |
| | | A partner in a partnership An officer, director, or mana | aina ovocutivo of a c | ornoration | | | |
| | | An owner of at least 5% of the | | | | | |
| Ŀ | 7 | No. None of the above applies. G | o to Part 12. | | | | |
| | | Yes. Check all that apply above a | nd fill in the details b | | | | |
| | | | | Describe the natur | e of the business | | entification number Do not all Security number or ITIN. |
| | | Business Name | | _ | | EIN: | |
| | | Number Street | | _ | | Dates busine | ess existed |
| | | Number Street | | Name of accounta | nt or bookkeeper | | |
| | | City State | Zip Code | | | From | To |
| | | | | | | | |
| | | | | Describe the natur | e of the business | | entification number Do not al Security number or ITIN. |
| | | Business Name | | _ | | EIN: | |
| | | Number Street | | Name of accounta | nt or bookkeeper | Dates busine | ess existed |
| | | City State | Zip Code | _ | · | From | То |
| | | ŕ | · | | | | |
| | | | | Describe the natur | e of the business | | entification number Do not all Security number or ITIN. |
| | | Duningan Name | | _ | | EIN: | |
| | | Business Name | | | | | |
| | | Number Street | | Name of accounta | nt or bookkeeper | Dates busine | ess existed |
| | | City State | Zip Code | | | From | То |
| | | | | | | | |
| | | | | | | | |

| | otor 1 | Denise Case 1 First Name | 10-07 100 | | <u>ed 03#04/16</u>)ocum@nt | Page | <u>ered</u> 034014416/147438: <u>44</u> 51 of 70 | Desc Main | |
|-----|---------|---|--|-----------------------------------|--------------------------------|-----------|--|------------------------------------|----|
| 28. | | nin 2 years before itors, or other pa | • | | | | to anyone about your business? | Include all financial institution | s, |
| | V | No | elle belevi | | | | | | |
| | ш | Yes. Fill in the det | alis delow. | | Date issued | | | | |
| | | | | | | | | | |
| | | Name | | | MM/DD/YYYY | | | | |
| | | Number Stree | t | | | | | | |
| | | City | State | Zip Code | _ | | | | |
| Par | t 12: | Sign Below | | | | | | | |
| | and c | | | | | | s, and I declare under penalty of p | | |
| | bankr | · · | | up to \$250,000, or im | | | otaining money or property by fra | | |
| | bankr | x | esult in fines u | u p to \$250,000, or i m | | | ars, or both. 18 U.S.C. §§ 152, 1341 | | |
| | bankr | x | esult in fines us/Denise Gordo ature of Debtor | u p to \$250,000, or i m | | | ers, or both. 18 U.S.C. §§ 152, 1341 | | |
| | | Signal Date | esult in fines us/Denise Gordo ature of Debtor 3/1/2016 | up to \$250,000, or im on 1 | prisonment for up | to 20 yea | Signature of Debtor 2 | 1, 1519, and 3571. | |
| | Did y | Signal Date | esult in fines us/Denise Gordo ature of Debtor 3/1/2016 | up to \$250,000, or im on 1 | prisonment for up | to 20 yea | Signature of Debtor 2 Date | 1, 1519, and 3571. | |
| | Did y∉ | ★ | esult in fines us/Denise Gordo ature of Debtor 3/1/2016 | up to \$250,000, or im on 1 | prisonment for up | to 20 yea | Signature of Debtor 2 Date | 1, 1519, and 3571. | |
| | Did ye | /s Signa Date ou attach addition lo | y Denise Gordo ature of Debtor 3/1/2016 onal pages to N | up to \$250,000, or im on 1 | prisonment for up | to 20 yea | Signature of Debtor 2 Date als Filing for Bankruptcy (Officia | 1, 1519, and 3571. | |
| | Did yo | /s Signa Date ou attach addition lo | y Denise Gordo ature of Debtor 3/1/2016 onal pages to N | on 1 Your Statement of F | prisonment for up | to 20 yea | Signature of Debtor 2 Date als Filing for Bankruptcy (Officia | 1, 1519, and 3571. | |
| | Did you | Date ou attach addition lo 'es ou pay or agree to | y Denise Gordo ature of Debtor 3/1/2016 onal pages to N | on 1 Your Statement of F | prisonment for up | to 20 yea | Signature of Debtor 2 Date als Filing for Bankruptcy (Officia | il, 1519, and 3571. Il Form 107)? | |

Debtor 1 Denise Case 16-07160 MDoc 1 Filed 03t01d/16 Entered 03d01d/16 (147v38:44 Desc Main Documentum Page 52 of 70

Additional Page

| 2. During | the last 3 | vears have | vou lived an | where other | than where | you live now? |
|-----------|----------------|-------------------|--------------|--------------------|--------------|---------------|
| Dui ii i | g tiric last o | y cui o, i iu v c | you nived un | y *** 10: 0 Ou 10: | ulali Wilcic | , ou |

| Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
|-----------------------------------|-------------------|-------------------|---|---------------------------------------|----------------------------|
| | | | | Same as Debtor 1 | Same as Debtor 1 |
| 2545 W Fullurton Number Street | | | From <u>5/1/2011</u> To <u>5/1/2014</u> | Number Street | From |
| Chicago City | Illinois State | 60647 Zip Code | <u> </u> | City State Zip Code | <u> </u> |
| City | State | Zip Code | | Same as Debtor 1 | Same as Debtor 1 |
| Number Street | | | From | Number Street | From |
| City | State | Zip Code | _ | City State Zip Code | _ |
| Number Street | | | — From To | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| City | State | Zip Code | _ | City State Zip Code | _ |
| Number Street | | | — From | Same as Debtor 1 Number Street | Same as Debtor 1 From To |
| City | State | Zip Code | _ | City State Zip Code Same as Debtor 1 | Same as Debtor 1 |
| Number Street | | | — From | Number Street | From |
| City | State | Zip Code | _ | City State Zip Code Same as Debtor 1 | Same as Debtor 1 |
| Number Street | | | — From | Number Street | From To |
| City | State | Zip Code | _ | City State Zip Code | |

| | Case 16-0716 | 0 Doc 1 Filed (| 03/01/16 | <u>03/0</u> 1/16 17:38:44 | Desc Main |
|---------------------------------|----------------------------|-----------------|----------------------|---------------------------|------------------------------------|
| Fill in this inform | ation to identify your cas | | | 1/10 17:00.44 | Desc Main |
| Debtor 1 | Denise | M | Gordon | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| | | | | | |
| Official F | orm 108 | | | | Check if this is an amended filing |
| | - | on for Individu | uals Filing Und | ler Chapter 7 | |

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

| Debtor Denise Case 16-0/160 D | | ered U3/01/16 17:38:44 54 o f 70 ——————————————————————————————————— | Desc Main |
|--|--|--|-------------------------------|
| 1 First Name Mid | dle Name Last Name | known) | _ |
| Part 2: List Your Unexpired Personal | Property Leases | | |
| For any unexpired personal property lease the information below. Do not list real estate least unexpired personal property lease if the truster of the trust | es. Unexpired leases are leases that are s | still in effect; the lease period has n | |
| Describe your unexpired personal proper | rty leases | Will the lea | ase be assumed? |
| Lessor's name: | | ☐ No ☐ Yes | |
| Description of leased property: | | | |
| Lessor's name: | | No Yes | |
| Description of leased property: | | | |
| Lessor's name: | | No Yes | |
| Description of leased property: | | | |
| Lessor's name: | | No Yes | |
| Description of leased property: | | | |
| Lessor's name: | | No Yes | |
| Description of leased property: | | | |
| Lessor's name: | | No Yes | |
| Description of leased property: | | | |
| Lessor's name: | | ☐ No ☐ Yes | |
| Description of leased property: | | | |
| Part 3: Sign Below | | | |
| Under penalty of perjury, I declare that I hat is subject to an unexpired lease. | ave indicated my intention about any prop | perty of my estate that secures a de | ebt and any personal property |
| 🗶 _/s/ Denise Gordon | × | | |
| Signature of Debtor 1 | Sign | nature of Debtor 1 | |
| Date 3/1/2016 | Date | 9 | |

MM/DD/YYYY

MM/DD/YYYY

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Denise M Gordon | | Case No. | |
|----|--|--|-----------------------------------|---------------------------------------|
| _ | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| 1 | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. year before the filing of the petition in bankruptcy, | or agreed to be paid to me, for services render | abovenamed debtor(s) and the | at compensation paid to me within one |
| | in connection w ith the bankruptcy case is as follows: For legal services, I have agreed to accept | vs: | | \$1,250.0 |
| | Prior to the filing of this statement I have received | | | \$0.00 |
| | Balance Due | | | \$1,250.00 |
| 2 | . The source of the compensation paid to me was: Debtor | Other (specify) | | |
| 3 | . The source of the compensation paid to me is: Debtor | Other (specify) | | |
| 4 | I have not agreed to share the above-disclose members and associates of my law firm. | ed compensation with any other person unless | they are | |
| | | ompensation with a other person or persons v y of the agreement, together with a list of the r tached. | | |
| 5 | . In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation | ed to render legal service for all aspects of the a, and rendering advice to the debtor in determ | | in bankruptcy; |
| | b. Preparation and filing of any petition, sch | edules, statements of affairs and plan which n | nay be required; | |
| | c. Representation of the debtor at the meet | ing of creditors and confirmation hearing, and | any adjourned hearings there | eof; |
| 6 | . By agreement with the debtor(s), the above-disclo | sed fee does not include the following service | es: | |
| | | | | |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement o eedings. | any agreement or arrangement for payment | to me for representation of the | e debtor(s) in this bankruptcy |
| | 3/1/2016 | /s/ Ma | ary Walters 6315822 | |
| | Date | Sig | gnature of Attorney | |
| | | | Semrad Law Firm Name of law firm | |
| | | | | |

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$30.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Denise Gordon Matter Number 469950-001 Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee of to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: 03/01/2016 | |
|---------------------------|--------|
| Client Well Straton | Client |
| Attorney) MULLER ERWOLLER | V3- |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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| In re: | Gordon, Denise M | Case No |
|--------|---|--|
| | Debtor(s) | 0.000 110 |
| | | Chapter. Chapter7 |
| | VERIFIC | ATION OF CREDITOR MATRIX |
| | The above named Debtors hereby verify the | at the attached list of creditors is true and correct to the best of their knowled |
| | | |
| Date: | 3/1/2016 | /s/ Gordon, Denise M |
| | | Gordon, Denise M |
| | | Signature of Debtor |

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Internal Revenue Service P.O. Box 7346 Philadelphia , PA 19101

Internal Revenue Service P.O. Box 7346 Philadelphia , PA 19101

Internal Revenue Service P.O. Box 7346 Philadelphia , PA 19101

Internal Revenue Service P.O. Box 7346 Philadelphia , PA 19101

CAVALRY PORTFOLIO SERV 4050 E COTTON CENTER BLV PHOENIX , AZ 85040

CHASE PO Box 15298 Wilmington , DE 19850

Offices of Michael D. Fine 131 S. Dearborn Chicago , IL 60603

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK, VA 23502

CCI 501 Greene Street # 302 Augusta , GA 30901

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 Case 16-07160 Doc 1 Filed 03/01/16 Entered 03/01/16 17:38:44 Desc Main CITIBANK N A 701 E 60TH ST N SIOUX FALLS , SD 57104 Page 64 of 70

BLITT & GAINES P C 661 GLENN AVE Wheeling , IL 60090

Portfolio Recovery Associates PO Bo x12914 Norfolk , VA 23541

Blitt & Gaines 661 Glenn Ave Wheeling , IL 60090

DELL FINANCIAL SERVICES INC 12234 N Interstate 35 Frontage Rd Austin , TX 78753

| Debtor 1 Denise Case 16 | -07160 Doc 1 Filed | 03/01/16 Entered 03/01/16 cunferm Page 65 of Toumber | | | | | |
|---|---|---|--|--|--|--|--|
| Part 6: Answer These Questions for Reporting Purposes | | | | | | | |
| 16. What kind of debts do you have? | No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts prima obtain money for a bus investment. No. Go to line 16c. Yes. Go to line 17. | ividual primarily for a personal, family. I rily business debts? <i>Business deb</i> isiness of the content of the | is are debts that you incurred to operation of the business or | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☑ No. t ☐ Yes. | | rty is excluded and administrative expenses are | | | | |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$50,000,001-\$500 million | ☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? Part 78. Sign Below | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** ** ** ** ** ** ** ** ** | | | | | | |

Case 16-07160 Doc 1 Filed 03/01/16 Entered 03/01/16 17:38:44 Desc Main Fill in this information to identify your case: Debtor 1 Denise Gordon First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106Dec amended filing Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Paride Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? V Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct /s/ Denise Gordon Signature of Debtor 1 Signature of Debtor 2 Date 3/1/2016 Date MM/DD/YYYY MM/DD/YYYY

| Debtor ' | Denise Case 16-07160 | | led 03/01/16 Docum@filen | Entered 03/01/16 17:38:44 Page 67 of 70 number (if known) | Desc Main | | |
|---|--|---|--|--|-----------|--|--|
| 28. W | 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | |
| <u> </u> | No Yes. Fill in the details below. | | | | | | |
| | | | Date issued | | | | |
| | Name | *************************************** | MM/DD/YYYY | | | | |
| | Number Street | | Putter | | | | |
| | City State | Zip Code | TO CONTINUE OF THE CONTINUE OF | | | | |
| Part 12: | Sign Below | | | | | | |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | |
| | Signature of Debtor | 1 🐔 | | Signature of Debtor 2 | | | |
| | Date 3/1/2016 | | | Date | | | |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes | | | | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | | | |
| ✓ No | | | | | | | |
| Ī. | Yes. Name of person | | | Attach the Bankruptcy Petition I Declaration, and Signature (Offi | | | |

Documenton Page 68 of 70 number (if Debtor Denise Μ 1 First Name Middle Name Last Name Pari24 List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: No Yes Description of leased property: No Lessor's name: Description of leased property: টোও Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease., 🗶 🛮 /s/ Denise Gordon Signature of Debtor 1 Signature of Debtor 1 Date 3/1/2016 Date MM/DD/YYYY MM/DD/YYYY

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Case 16-07160 Doc 1 Filed 03/01/16 Entered 03/01/16 17:38:44 Desc Main Document Page 69 of 70 UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Gordon, Denise M | ON- | | | |
|---------------------------------|---|---|--|--|--|
| | Debtor(s) | Case No | | | |
| | | Chapter. Chapter7 | | | |
| VERIFICATION OF CREDITOR MATRIX | | | | | |
| | The above named Debtors hereby verify the | at the attached list of creditors is true and correct to the best of their knowledge. | | | |
| Date: | 3/1/2016 | Is/ Gordon, Denise M Dumm Al Agrange of Debtor | | | |

| Debtor 1 Case 16-07160 Doc 1 Filed 03/01/16 Entered 03/01/16 17:38 Document Page 70 of Pounder (if known) | 3:44 Desc Main | | | | | |
|---|---------------------------------|--|--|--|--|--|
| Column A Debtor 1 | Column B Debtor 2 or | | | | | |
| 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$0.00 | non-filing spouse | | | | | |
| 9.Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10.Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the | | | | | | |
| total below. | | | | | | |
| Total amounts from separate pages, if any. +\$0.00 | + | | | | | |
| 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$2,353.58 | | | | | |
| Pari≱4 Determine Whether the Means Test Applies to You | Total current monthly income | | | | | |
| 12. Calculate your current monthly income for the year. Follow these steps: | e 11 here → \$2,353.58 | | | | | |
| Multiply by 12 (the number of months in a year). 12b. The result is your annual income for this part of the form. | X 12 12b. \$28,242.96 | | | | | |
| 13 Calculate the median family income that applies to you. Follow these steps: | | | | | | |
| Fill in the state in which you live. | | | | | | |
| Fill in the number of people in your household. | | | | | | |
| Fill in the median family income for your state and size of household. | 13. \$49,682,00 | | | | | |
| To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 4. How do the lines compare? | | | | | | |
| 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. | | | | | | |
| 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. | | | | | | |
| an3: Sign Below | | | | | | |
| By signing here, I declare under penalty of perjuty that the information on this statement and in any attachments is true and c | correct. | | | | | |
| Signature of Debtor 1 Signature of Debtor 2 Signature of Debtor 2 | | | | | | |
| Date 3/1/2016 Date MM/DD/YYYY MM/DD/YYYY | | | | | | |
| If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form. | | | | | | |